FORM DEP 7008B

APPLICATION FOR COVERAGE UNDER 401 KAR 52:080 FOR SOURCES NOT ALREADY IN THE KYEIS

SECTION 1. GENERAL INFORMATION								
Company Contact: Telephone No.: Telephone No.:								
Company Name: _				D&B (DUNS) No.:				
Company Street Address:				_ _ 				
City:	State:	Zip: _	County:	_ _	Primary SIC #: _ _			
Plant Contact:								
Plant Name:								
City: State: ZIP:								
SECTION 2: SOURCE LOCATION								
Location of plant:								
Area Around Plant: □Commercial □Residential □Industrial □Industrial Park □Rural □Urban								
Approximate distance to nearest residence or commercial property:								
UTM or Standard Location Coordinates								
UTM Coordinates:	Zone:	Horizontal (km)	Vertical (km)					
	Latitude:	degrees	minutes		seconds			
Standard Coordinates:	Longitude:	degrees	minutes		seconds			

FORM DEP 7008B

SECTION 3: EMISSION UNIT INFORMATION

If you have fewer than 100 employees and are independently owned, you may contact the Kentucky Business Environmental Assistance Program to assist you in completing this Section (Phone 800-562-2327). If you have 100 or more employees, or are not independently owned, assistance is available from the Division for Air Quality, Emissions Inventory Section, at (502) 573-3382.

List each stack or vent through which air pollutants are emitted to the outside air, assigning each stack or vent a number. Attach additional sheets if necessary.

Stack or Vent Number (2 digits)	Stack Height or Height of Release (ft)	Diameter (ft.)	Temperature (° F)	Flow Rate (ACFM)
_				
_		_ .		
_		_ _ . _	_	

List and assign a number to each emission unit. Identify units of measurement for Production / Usage Rates (e.g., gallons, thousands of gallons, pounds, tons). For coal or oil combustion, include sulfur, ash, and heat content. Attach additional sheets if necessary.

Stack or Vent Number from above, used by the Emission	Emission					Maximum Hourly Production / Usage Rate
Unit (if none, write none)	Unit Number (2 digits)	SCC code (if known)	Process Description	Maximum Annual Production / Usage Rate	Actual Annual Production / Usage Rate	(NOTE: Attach all applicable MSDS sheets)
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Provide the	following informa	tion to identif	by the nallutants emit	ted from each emission	unit. Use additional she	ots if nocossary				
Emission Unit Number (from above)	Date Construct (yy/mm/dd)	ed	y the pottutants emitt Pollutant Name	Pollutant CAS or SAROAD Number (if known)	Emission Factor (It production or us	os. / unit of	Туре	of Control uipment	Code (if known)	% Removal Efficiency of Control Equipment
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	_ / /									
	_/ /									
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For each emission unit, provide the following information regarding the regulatory requirements. Attach additional sheets if necessary.										
Emission Unit Number (from above)	Regulatory C	Citation		Method f	or demonstrating complia	nce with regulat	ory requ	irement.		
_	401KAR _	: _								
_	401KAR _	: _								
	401KAR	:								

FORM DEP 7008B

	401KAR _ : _	
_	401KAR _ : _	
_	401KAR _ : _	
		SECTION 4: CERTIFICATION AND SUBMITTAL
The followin	ng certification must be signed	by the owner or operator of the source, or by a responsible official.
I certify that	t, following reasonable inquiry	and to the best of my knowledge, the information contained in this application is complete and accurate.
Signature:		Date:
Print Name:	:	Title:
		Mail or fax the completed registration form and all required attachments to the Kentucky Division for Air Quality; Attn: EIS Section; 200 Fair Oaks Lane, 1st Floor; Frankfort, KY 40601; Fax No. (502) 564-4666.

Issued May, 2000